

Standard Form 171-A - Continuation Sheet for SF 171

Form Approved:
OMB No. 3206-0012

● Attach all SF 171-A's to your application at the top of page 3.

1. Name (Last, First, Middle Initial)	2. Social Security Number
3. Job Title or Announcement Number You Are Applying For	4. Date Completed

ADDITIONAL WORK EXPERIENCE BLOCKS

<input style="width: 100%; height: 100%;" type="text"/> Name and address of employer's organization (include ZIP Code, if known)	Dates employed (give month, day and year) From: _____ To: _____		Average number of hours per week	Number of employees you supervised
	Salary or earnings Starting \$ _____ per _____ Ending \$ _____ per _____		Your reason for leaving	
	Your immediate supervisor Name	Area Code	Telephone No.	Exact title of your job

Description of work: Describe your specific duties, responsibilities and accomplishments in this job, **including** the job titles(s) of any employees you supervised. *If you describe more than one type of work (for example, carpentry and painting, or personnel and budget), write the approximate percentage of time you spent doing each.*

For Agency Use (skill codes, etc.)

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Standard Form 171-A (REV. 6-88)
U.S. Office of Personnel Management
V3.00 FPM Chapter 295